

01

AIIMS RISHIKESH

INDENT FOR PURCHASE OF STORES

(FORM P-2)

1. Please fill a separate form for each item
2. Please fill completely in triplicate. Incomplete forms and those with illegible writing may not be accepted.

Name of items with full specifications & required accessories	Quantity (in figures and words)	Cost per unit (approx) in foreign currency and Rupees	Total cost (approx)
Ventilator with Inbuilt Electrical Impedance Tomography (EIT) Module.	01 (One)	100 Lakh	100 Lakh.
Specification - As Attached Annexure - 01,			

3. For equipment, please provide the following information

Long Protective Ventilation requires optimal PEEP & Tidal Volume setting which is challenging in ARDS. EIT allows continuous & direct observation of ventilation in different lung areas allowing best possible individualized ventilation therapy in ARDS.

Is the equipment to be used for patient care or research: **BOTH**
(70% patient care; 30% research)

(02)

Is this/ similar equipment already available in the department? **NO**When purchased? **-** Cost at that time: **-** Present functional status: **-**Tests/ procedures done on this equipment in last year: **-**Revenue generated by this equipment in last year: **-**If yes, what is the justification for this purchase? **-**Is this/similar equipment available in any other department in the Institute? **NO**If yes, what is the justification for this purchase? **-****4. For Consumables, please provide following information: **NA****

Description of stocks available

When was it last purchased? In what quantity? Cost;

Source

Test/ procedures done in this period:

Revenue generated in this period:

Average annual consumption

Shelf life

Period for which this purchase will last Number of tests likely to be done with this quantity:

5. For furniture, please provide the following information: **NA**

Exact location and use

Existing furniture at that place

Justification for this purchase

Possible sources (name all sources you know) from where item may be obtained (name, address, phone no, fax no, email, etc of contact person)

INDENTOR **डॉ. प्रखर शर्मा /Dr. Prakhar Sharma**
 सहायक आचार्य /Assistant Professor
 Signature..... **पल्मोनरी मेडिसिन /Pulmonary Medicine**
 Name... **Dr. Prakhare Sharma**
 रमस, ऋषिकेश /AIIMS, Rishikesh

Designation... **Associate Professor**Date... **25/09/2023**

HEAD OF DEPARTMENT/SECTION

Signature..... **(21/9/23)**Name... **Dr. Gireesh Sindhvani**Designation... **Professor & Head**

Stamp..... **डॉ. गिरिश सिंधवानी /Dr. Gireesh Sindhvani**
 आचार्य एवं विभागाध्यक्ष, पल्मोनरी मेडिसिन
 Professor & Head, Pulmonary Medicine
 एम्स, ऋषिकेश /AIIMS, Rishikesh

04

P-3 FORM

(to be attached with P-2 form for Proprietary items)

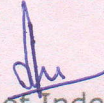
AIIMS Rishikesh

PROPRIETARY ARTICLE CERTIFICATE

It is certified that the items (~~Ventilator with Inbuilt Electrical Impedance Tomography (EIT) module.~~) required in the P-2 form should be purchased from M/s Speciality Pharma..... To the best of my knowledge M/s Speciality Pharma..... are the sole manufacturer/agents of the sole manufacturers M/s Dräger India Pvt. Ltd.....

Similar items manufactured by other firm(s) shall not be suitable for our purpose for the following reasons:-

As per our search, above item is the only commercially available ventilator with required specifications and is registered as a proprietary item (certificate attached).


(Sign of Indenter) डॉ. प्रखर शर्मा / Dr. Prakhar Sharma
सह-आचार्य, पल्मोनरी मेडिसिन
Associate Professor of Pulmonary Medicine
एम्स, ऋषिकेश / AIIMS, Rishikesh

Dated 25/09/2023

Designation Associate Professor

Department Pulmonary medicine

Recommendat on:

Signature of Head of Department/Section

N.B.: The indenter before recording the abve certificate should satisfy himself that the article is genuinely of proprietary nature manufactured under patent laws.